

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	6-28-01
FORMALITY REVIEW	BZ	IC3-883	08-21-01
RESPONSE FORMALITY REVIEW	me	1020	11-9-01

# INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral)... Canceled                      A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Date
Final	
Original	
1	9/5/03
2	1/28/03
3	1/28/03
4	1/28/03
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50	1/28/03

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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IC3-883  
 08/22/01  
 11-9-01